FORM D

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

PROCESSED

FORM D

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

THOMSON REUTERS UNIFORM LIMITED OFFERING EXEMPTION

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DATE RECEIVED					
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Name of Offering	(☐ check if this is an an mpany Interests of First		•	ndicate change.)		SEC Mail			
Filing Under (Check I	Mail Processing								
•		Rule 504	☐ Rule 505	☑ Rule 506	☐ Section 4(6)				
Type of Filing:	New Filing	☐ Amendment				MAY 06 ZUU8			
	A. BASIC IDENTIFICATION DATA								
Enter the inform	ation requested about the	issuer				Washington, DC			
Name of Issuer	check if this is an am	endment and name h	as changed, and in	dicate change.		109			
First Investors Cast	n Reserve Fund, a Series	of First Investors In	nvestment Fund, L	LC					
Address of Executive	Offices:		(Number and Stree	et, City, State, Zip Co	ode) Telephone i	Number (Including Area Code)			
c/o First Investment	t Management Company,	Inc. 110 Wall Street	, New York, New Y	ork 10005		(212)858.8000			
Address of Principal	Offices		(Number and Stree	et, City, State, Zip Co	ode) Teleph	7-J-\			
(if different from Exec	cutive Offices)					LIERN SURLENIA SERVICE			
Brief Description of B	lusiness: The issuer	is a private investm	ent fund.		<del></del>				
					l				
Type of Business Org	ganization								
[	corporation	☐ limited p	artnership, already	formed	other (please :	08049583			
(	☐ business trust	☐ limited p	artnership, to be fo	med	Limited Liability C				
			Month	Yea					
Actual or Estimated	Date of Incorporation or Or	ganization:	0 2	0	<b>8</b> ⊠ A	ctual			
Jurisdiction of Incorpo	oration or Organization: (E	Enter two-letter U.S. F	Postal Service Abbre	eviation for State:					
•	.,			r other foreign jurisd	iction)	D E			

### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are

not required to respond unless the form displays a currently valid OMB control number.

		A. BASIC ID	ENTIFICATION DAT	A	
<ul> <li>Each beneficial owr</li> <li>Each executive office</li> </ul>	e issuer, if the is ner having the po cer and director o	suer has been organized with	ect the vote or disposition of		a class of equity securities of the issuer; rtnership issuers; and
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		□ Director	☐ General and/or Managing Partner
Full Name (Last name first,	f individual):	Head, Kathryn S.			
Business or Residence Add	ress (Number an	d Street, City, State, Zip Cod	e): c/o First Investors Co	•	oration, 95 Wall Street
Check Box(es) that Apply:	Promoter	☐ 8eneficial Owner	☑ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):	Lavoie, Łarry R.			
Business or Residence Add	ress (Number an	d Street, City, State, Zip Cod	e): c/o First Investors Co New York, New York 1		oration, 95 Wall Street
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first,	f individual):	Brown, Carol Lerner			
Business or Residence Add	ress (Number an	d Street, City, State, Zip Cod	e): c/o First Investors Cor New York, New York 10	•	ration, 95 Wall Street
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner			☐ General and/or Managing Partner
Full Name (Last name first,	f individual):	Lipkus, William M.			
Business or Residence Add	ress (Number an	d Street, City, State, Zip Cod	e): c/o First Investors Cor New York, New York 1	•	ration, 95 Wall Street
Check Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	f individual):	First Investors Managemen	nt Company, Inc.	<u>, , , , , , , , , , , , , , , , , , , </u>	
Business or Residence Add	ress (Number an	d Street, City, State, Zip Cod	e 110 Wall Street, New Yo	rk, New York 100	05
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first,	f individual):	First Investors Fund for In	come		
Business or Residence Add	ress (Number an	d Street, City, State, Zip Cod	e): c/o First Investors Co New York, New York 1	•	eration, 95 Wall Street
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):	First Investors Total Retu	rn Fund		
Business or Residence Add	ress (Number an	d Street, City, State, Zip Cod	e): c/o First Investors Co New York, New York 1	•	ration, 95 Wall Street
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual): Fire	st Investors Value Fund			
Business or Residence Add	ress (Number an	d Street, City, State, Zip Cod	e): c/o First Investors Co New York, New York 1	•	ration, 95 Wall Street

	B. INFORMATION ABOUT OFFERING												
										_			
1.	Has the issue	er sold, or o	does the is	suer inten			edited inve pendix, Co					☐ Yes	⊠ No
2.	What is the n	ninimum in	vestment t	hat will be	accepted	from any i	ndividual?					· ·	o minimum* ee Walved
												•	
3.	Does the offe		•	•	•							☐ Yes	i ⊠ No
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Full	Full Name (Last name first, if individual)  Not applicable												
Bus	ness or Resid	ence Addr	ess (Numb	er and Str	eet, City, S	State, Zip (	Code)		· • • • • • • • • • • • • • • • • • • •				
Nam	e of Associate	ed Broker	or Dealer				_		•	. <u></u>			
Stat	es in Which P												C All Shake
	(Check "All S ALI ☐ [AK]		neck indivi [AR]		,						☐ [Hi]		☐ All States
	. –	□ [IA]	(KS)		□ (LA)					☐ [MN]	_	☐ [MO]	
			☐ [NH]			□ [NY]		☐ [ND]					
	RI) 🔲 (SC)	☐ [SD]	□ [TN]	<b>□</b> (τχ)		[VT]	□ [VA]	□ [WA]		[Wi]	□ [WY]	□ [PR]	
Full	Name (Last n	ame first, i	individual	)					•				
Bus	ness or Resid	ence Addr	ess (Numb	er and Str	eet, City, S	State, Zip (	Code)						
Nan	e of Associate	ed Broker o	or Dealer										
Stat	es in Which Pe (Check "All S								**********				☐ All States
		□ [AZ]									☐ (HI)	□ [ID]	_
	L) 🔲 [IN]	□ [IA]	[KS]	□ [KY]	[LA]	☐ [ME]	[MD]	☐ [MA]	[MI]	☐ [MN]	☐ [MS]	[MO]	
	MI] [NE]	□ [NV]	□ [NH]	□ (NJ)	[MM]	[YN]	□ (NC)	□ [ND]				□ [PA]	
	RI] [SC]	[SD]		□ (TX)	[נדט]	□ [\ <u>\</u> \L	□ [VA]	[WA]	□ [WV]	[WI]	□ [WY]	[PR]	
Full	Name (Last na	ame first, it	individual	)			-						
Bus	ness or Resid	ence Addr	ess (Numt	er and Str	eet, City, S	State, Zip (	Code)						
Nan	e of Associate	ed Broker o	or Dealer									,	
Stat	es in Which Po (Check "All S												☐ All States
			☐ [AR]							☐ [GA]	[HI]	[OI]	
	L) [IN]	□ [IA]	☐ (KS)	□ [KY]		☐ [ME]	☐ [MD]	☐ [MA]	[MI]	☐ [MN]	☐ [MS]	[MO]	
	AT] [NE]	□ (NV)	□ [NH]	[LN]	□ [NM]	□ [NY]	☐ [NC]	□ (ND)			☐ (OR)	[PA]	
	RI] 🔲 [SC]	☐ [SD]	☐ [TN]	□ [TX]	[UT]	[VT]	□ [VA]	□ [WA]	[WV]	□ (WI)		□ [PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box   and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	<u>\$</u>	0	\$	0
	Equity	\$	0	\$	0
	☑ Common ☐ Preferred				
	Convertible Securities (including warrants)	<u>\$</u>	0_	\$	0
	Limited Liability Company Interests	. <b>\$</b>	118,625,000	_\$_	118,625,000
	Other (Specify)	\$	0_	_\$	0
	Total	\$	118,625,000	s	118,625,000
	Answer also in Appendix, Column 3, if filing under ULOE			<u> </u>	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors		20	\$	118,625,000
	Non-accredited Investors			\$	
	Total (for filings under Rule 504 only)			\$	
	Answer also in Appendix, Column 4, if filing under ULOE				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.				
	Type of Offering		Types of Security		Dollar Amount Sold
	Rule 505		n/a	\$	n/a
	Regulation A	u	n/a	\$	n/a
	Rule 504		n/a	 \$	n/a
	Total		n/a	<u> </u>	n/a
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	·	100	•	
	Transfer Agent's Fees		🗆	\$	0
	Printing and Engraving Costs		🗆	\$	0
	Legal Fees		🛛	\$	96,081
	Accounting Fees		🗆	\$	0
	Engineering Fees		🖸	\$	0
	Sales Commissions (specify finders' fees separately)		🗆	\$	0
	Other Expenses (identify)		<del></del>	\$	0
	Total		_	\$	96,081
				_	

4	b. Enter the difference between the aggregate offering Question 1 and total expenses furnished in response to	g price given in response to Part C Part C-Question 4.a. This differer	- nce is the	Annual State of the State of th		118,528,919
5	"adjusted gross proceeds to the issuer."	ds to the issuer used or proposed any purpose is not known, furnish The total of the payments listed mu	to be an st equal	Payments to Officers, Directors & Affiliates		Payments to Others
	Salaries and fees			\$	🗆	\$
	Purchase of real estate			\$	_ =	\$
	Purchase, rental or leasing and installation of ma	achinery and equipment		\$		\$
	Construction or leasing of plant buildings and fac	cilities		\$		\$
	Acquisition of other businesses (including the va offering that may be used in exchange for the as pursuant to a merger	sets or securities of another issuer		\$		\$
	Repayment of indebtedness			\$		<u>\$</u>
	Working capital			\$	🛚	<b>\$</b> 118,528,919
	Other (specify):			\$	_ □	\$
				\$	_ 🗆	\$
	Column Totals			\$	🛛	\$118,528,919
	Total payments Listed (column totals added)			⊠ <u>.</u>	118,5	28,919
Ž.		D. FEDERAL SIGNATUR	}E,‰:			
COI	s issuer has duly caused this notice to be signed by the institutes an undertaking by the issuer to furnish to the U. the issuer to any non-accredited investor pursuant to part	S. Securities and Exchange Comm	n. If this ission, up	notice is filed under Ru oon written request of it	ule 505, the	e following signature a information furnished
	uer (Print or Type) First Investors Cash Reserve nd, a series of First Investors Investment Fund, LLC	Signature Laft		*	Date May (	6, 2008
	me of Signer (Print or Type)	Title of Signer (Print or Type): C	hairman	& President of First I		
Ka	thryn S. Head	Company, Inc., Manager				

## **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	See Appe	endix, Column 5, for state response.					
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.						
3.	. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.						
4.	•	familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering s filed and understands that the issuer claiming the availability of this exemption has the burden sfied.					
	suer has read this notification and knows the contents ized person.	to be true and has duly caused this notice to be signed on its behalf by the undersigned duly					
	(Print or Type) First Investors Cash Reserve a series of First Investors Investment Fund, LLC	Signature Date May 6, 2008					
Name	of Signer (Print or Type)	Title of Signer (Print or Type): Chairman & President of First Investors Management Company,					

Inc., Manager

Is any party described in 17 CFR 230.262 presently subject to any of the disqualification

# Instruction:

Kathryn S. Head

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APF	PENDIX					
								5		
1	2	2	3		4					
	Intend to non-ad investors (Part B -	in State	Type of security and aggregate offering price offered in state (Part C Item 1)		Type of i amount puro (Part C	nvestor and chased in State : – Item 2)		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)		
State	Yes	No	LLC Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL		ì						<u> </u>		
AK									<u> </u>	
AZ	·									
AR								<u></u>		
CA										
со										
СТ										
DE								<u> </u>		
DC								<u> </u>		
FL								<u> </u>		
GA										
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ID										
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IN										
IA								<u> </u>		
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KY	-									
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MT										
NE										
NV										
NH										
NJ										
NM								T		

				AP	PENDIX					
1	1 2 3 4									
	Intend to non-ad investors (Part B -	ccredited in State	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of investor and Amount purchased in State (Part C – Itern 2)					
State	Yes	No	LLC Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
NY		Х	\$118,625,000	20	\$118,625,000	0	\$0		х	
NC										
ND										
ОН										
ок										
OR										
PA										
RI										
SC										
SD										
TN										
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VA								<u> </u>		
WA			· ·· · · · · · · · · · · · · · · · · ·							
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